

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:)	
)	Group Art Unit: 3739
David K. Swanson)	
)	Confirmation No.: 5299
Serial No.: 10/727,149)	
)	Examiner: Vrettakos, Peter J.
Filed: December 2, 2003)	
For: SURGICAL METHODS AND)	
APPARATUS FOR MAINTAINING)	
CONTACT BETWEEN TISSUE AND)	
ELECTROPHYSIOLOGY ELEMENTS)	
AND CONFIRMING WHETHER A)	
THERAPEUTIC LESION HAS BEEN)	
FORMED)	

TRANSMITTAL

M/S: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Documents enclosed:

Transmitted herewith in response to the Restriction Requirement mailed on December 27, 2007, which is also responsive to the non-final Office Action dated June 14, 2007, for the above-identified application, are the following:

- ☒ Transmittal with certificate of transmittal and Request for 2 month Extension of Time (3 pages);
- ☒ Amendment and Response (12 pages);

CERTIFICATE OF TRANSMITTAL

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below via the USPTO-EFS-Web filing system.

3/11/08
Date of deposit

Nancy Rushton
Name of Person transmitting Paper

/NancyRushton/
Signature of Person depositing Paper

2. Request for EXTENSION of Time:

The proceedings herein are for a patent application and the provisions of 37 CFR § 1.136 apply.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)		FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/>	one month	\$60.00	\$120.00
<input checked="" type="checkbox"/>	two months	\$230.00	\$460.00
<input type="checkbox"/>	three months	\$525.00	\$1,050.00
<input type="checkbox"/>	four months	\$820.00	\$1,640.00
<input type="checkbox"/>	five months	\$1,115.00	\$2,230.00
		Fee	\$460.00

- ☒ If any extension fee is required, please consider this a petition therefore.

3. Filing FEES:

- ☐ Applicant claims small entity status pursuant to 37 CFR 1.27.

EXTRA CLAIMS FEE				LARGE ENTITY	SMALL ENTITY	
CLAIMS	CURRENT #	# OF CLAIMS PREVIOUSLY PAID	# EXTRA	RATE	RATE	
Total Claims	33	46	0	× \$50.00	× \$25.00	\$0.00
Independent claims	3	4	0	× \$210.00	× \$105.00	\$0.00
MULTIPLE DEPENDENT CLAIM(S)						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$370.00	\$185.00	\$0.00

TOTAL OF ABOVE CALCULATIONS: \$0.00

Extension of Time from above \$460.00

Submission of an Information Disclosure Statement

TOTAL FEES DUE HEREWITH **\$460.00**

4. Method of Payment of fee:

- ☒ Payment made through EFS-Web filing system by credit card in the amount of **\$460.00**.
- ☐ Charge Vista IP Law Group LLP Deposit Account No. **50-1105** in the amount of **\$0.00**.

☒ The Commissioner is authorized to charge Vista IP Law Group LLP Account No. **50-1105** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, and to credit any overpayments to said Deposit Account No. **50-1105**.

Dated: March 11, 2008

By: /GaryDLueck/
Gary D. Lueck
Reg. No. 50,791

Customer	VISTA IP LAW GROUP LLP
Number	12930 Saratoga Avenue, Suite D-2
41696	Saratoga, CA 95070
PATENT	Phone (408) 777-2905
TRADEMARK	Fax (408) 877-1662
OFFICE	